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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)										
	Knoblock, Steven, Craig, ,					100 "1		1			
(b) Address (number and street) 1 Maracay	□ Che	Candidate's FEC Identification Number H0CA49121								
(c) City, State, and ZIP Code					3. Is This		New			Amended
	San Clemente		CA	92672	2	Statem	nent X	(N)	OR		(A)
4. F	Party Affiliation	5. Office Sought			6. State & Dist	rict of Candid	late				
	REPUBLICAN PARTY	House			CA	49					
	DE	SIGNATION	OF PRIN	CIPAL	CAMPAIG	N COMMI	TTEE				
7. I	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)										
	NOTE: This designation should be f	iled with the appr	opriate office	listed in th	ne instructions.						
(a) Name of Committee (in full)										
	Knoblock for Congre	ess									
	b) Address (number and street)										
,	7918 El Cajon Blvd.										
	#N-162										
(c) City, State, and ZIP Code										
	La Mesa				CA	91942	!				
	DE	SIGNATION		_	_		TEES				
	DE			_	THORIZED g Representativ		TEES				
	DE hereby authorize the following name andidacy.	(Inc	cluding Joint F	undraisin	g Representativ	res)		expend	d funds	on bel	nalf of my
C	hereby authorize the following nam	(Inc	cluding Joint F	undraising	g Representativ	res)		expend	d funds	on beł	nalf of my
	hereby authorize the following name andidacy.	(Inc	cluding Joint F	undraising	g Representativ	res)		expend	d funds	on bel	nalf of my
	hereby authorize the following namerandidacy.	(Inc	cluding Joint F	undraising	g Representativ	res)		expend	d funds	on beł	nalf of my
	hereby authorize the following name andidacy.	(Inc	cluding Joint F	undraising	g Representativ	res)		expend	d funds	on beł	nalf of my
(hereby authorize the following name andidacy.	(Inc	cluding Joint F	undraising	g Representativ	res)		expend	d funds	on beł	nalf of my
(hereby authorize the following name andidacy. NOTE: This designation should be formulated as a longer than the following name of Committee (in full)	(Inc	cluding Joint F	undraising	g Representativ	res)		expend	d funds	on beł	nalf of my
(((((((((((((((((((hereby authorize the following name andidacy. NOTE: This designation should be for a) Name of Committee (in full) b) Address (number and street)	(Inc	cluding Joint F	undraising	g Representativ	res)		expend	d funds	on beł	nalf of my
(hereby authorize the following name andidacy. NOTE: This designation should be formulated as a longer than the following name of Committee (in full)	(Inc	cluding Joint F	undraising	g Representativ	res)		expend	d funds	on beł	nalf of my
(hereby authorize the following name andidacy. NOTE: This designation should be for a) Name of Committee (in full) b) Address (number and street)	(Inc	cluding Joint F	undraising	g Representativ	res)		expend	d funds	on beł	nalf of my
(hereby authorize the following name andidacy. NOTE: This designation should be for a) Name of Committee (in full) b) Address (number and street) c) City, State, and ZIP Code	(Incomplete (Incomplete) (Incom	cluding Joint F	undraisin	g Representativ al campaign cor ee.	es) nmittee, to re	ceive and				nalf of my
(hereby authorize the following name andidacy. NOTE: This designation should be for a) Name of Committee (in full) b) Address (number and street)	(Incomplete (Incomplete) (Incom	cluding Joint F	undraisin	g Representativ al campaign cor ee.	es) nmittee, to re	ceive and				nalf of my
(hereby authorize the following name andidacy. NOTE: This designation should be for a) Name of Committee (in full) b) Address (number and street) c) City, State, and ZIP Code	(Incomplete (Incomplete) (Incom	cluding Joint F	undraisin	g Representativ al campaign cor ee.	es) nmittee, to re	ceive and				nalf of my
(Sign	hereby authorize the following name andidacy. NOTE: This designation should be formal and the following name of Committee (in full) b) Address (number and street) c) City, State, and ZIP Code	(Incomplete (Incomplete) (Incom	cluding Joint F	e best of t	g Representativ al campaign cor ee.	es) nmittee, to re and belief it is	ceive and				nalf of my
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(Sign	hereby authorize the following name andidacy. NOTE: This designation should be formal in the following name of Committee (in full) b) Address (number and street) c) City, State, and ZIP Code I certify that I have example of Candidate	(Incomplete (Incomplete) (Incom	cluding Joint F	e best of t	g Representativ al campaign cor ee.	es) nmittee, to re and belief it is	ceive and				nalf of my
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FEC FORM 2 (REV. 02/2009)